

12-26-A

JC978 U.S. PTO
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PTO/SB/05 (08-00)
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JC929 U.S. PTO
09/746854
12/22/00

UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

1. Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original and a duplicate for fee processing)
2. Applicant claims small entity status.
See 37 CFR 1.27.
3. Specification [Total Pages **35**] (preferred arrangement set forth below)
 - Descriptive title of the invention
 - Cross Reference to Related Applications
 - Statement Regarding Fed sponsored R & D
 - Reference to sequence listing, a table, or a computer program listing appendix
 - Background of the Invention
 - Brief Summary of the Invention
 - Brief Description of the Drawings (if filed)
 - Detailed Description
 - Claim(s)
 - Abstract of the Disclosure
4. Drawing(s) (35 U.S.C. 113) [Total Sheets **6**]
5. Oath or Declaration [Total Pages]
 - a. Newly executed (original or copy)
 - b. Copy from a prior application (37 CFR 1.63 (d)) (for continuation/divisional with Box 17 completed)
 - i. **DELETION OF INVENTOR(S)**
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
6. Application Data Sheet. See 37 CFR 1.76

17. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

Continuation Divisional Continuation-in-part (CIP) of prior application No.: _____ / _____

Prior application information: Examiner _____ Group / Art Unit _____

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

18. CORRESPONDENCE ADDRESS

<input type="checkbox"/> Customer Number or Bar Code Label	(Insert Customer No. or Attach Bar code label here)			or <input type="checkbox"/> Correspondence address below
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Name	Brown Raysman Millstein Felder & Steiner LLP			
Address	1880 Century Park East, Suite 711			
City	Los Angeles	State	CA	Zip Code
Country	USA	Telephone	(310) 712-8300	Fax (310) 712-8383

Name (Print/Type)	Brooke W. Quist		Registration No. (Attorney/Agent)	45,030
Signature	<i>Brooke W. Quist</i>		Date	12/22/00

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

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FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$) \$1,042.00

Complete if Known

Application Number	
Filing Date	
First Named Inventor	Jim Morrow
Examiner Name	
Group Art Unit	
Attorney Docket No.	10407/476

METHOD OF PAYMENT

1. The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number 02-4270

Deposit Account Name Brown Raysman Millstein Felder & Steiner LLP

Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17

Applicant claims small entity status See 37 CFR 1.27

2. Payment Enclosed:

Check Credit card Money Order Other

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
105	130	205	65	Surcharge - late filing fee or oath	
127	50	227	25	Surcharge - late provisional filing fee or cover sheet	
139	130	139	130	Non-English specification	
147	2,520	147	2,520	For filing a request for ex parte reexamination	
112	920*	112	920*	Requesting publication of SIR prior to Examiner action	
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	
115	110	215	55	Extension for reply within first month	
116	390	216	195	Extension for reply within second month	
117	890	217	445	Extension for reply within third month	
118	1,390	218	695	Extension for reply within fourth month	
128	1,890	228	945	Extension for reply within fifth month	
119	310	219	155	Notice of Appeal	
120	310	220	155	Filing a brief in support of an appeal	
121	270	221	135	Request for oral hearing	
138	1,510	138	1,510	Petition to institute a public use proceeding	
140	110	240	55	Petition to revive - unavoidable	
141	1,240	241	620	Petition to revive - unintentional	
142	1,240	242	620	Utility issue fee (or reissue)	
143	440	243	220	Design issue fee	
144	600	244	300	Plant issue fee	
122	130	122	130	Petitions to the Commissioner	
123	50	123	50	Petitions related to provisional applications	
126	240	126	240	Submission of Information Disclosure Stmt	
581	40	581	40	Recording each patent assignment per property (times number of properties)	
146	710	246	355	Filing a submission after final rejection (37 CFR § 1.129(a))	
149	710	249	355	For each additional invention to be examined (37 CFR § 1.129(b))	
179	710	279	355	Request for Continued Examination (RCE)	
169	900	169	900	Request for expedited examination of a design application	
Other fee (specify) _____					

SUBTOTAL (1) (\$) \$710.00

2. EXTRA CLAIM FEES

Total Claims	Extra Claims	Fee from below	Fee Paid
34	-20** = 14	x 18	= \$252.00
Independent Claims 4	- 3** = 1	x 80	= \$80.00
Multiple Dependent			= _____

Large Entity Small Entity

Fee Code (\$)	Fee Code (\$)	Fee Description		
103	18	203	9	Claims in excess of 20
192	80	202	40	Independent claims in excess of 3
104	270	204	135	Multiple dependent claim, if not paid
105	80	209	40	** Reissue independent claims over original patent
110	18	210	9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$) \$332.00

**or number previously paid, if greater; For Reissues, see above

SUBTOTAL (3) (\$) \$0.00

SUBMITTED BY

Complete (if applicable)

Name (Print/Type)	Brooke W. Quist	Registration No. (Attorney/Agent)	45,030	Telephone	(310) 712-8300
Signature	Brooke W. Quist			Date	12/22/00

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

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